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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/814,783	
	Filing Date	April 1, 2004	
	First Named Inventor	Helmut D. LINK	
	Art Unit	3733	
	Examiner Name	A. R. Reimers	
Total Number of Pages in This Submission	7	Attorney Docket Number	246472006600

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Receipt Postcard
<div>Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	MORRISON & FOERSTER LLP		
Signature			
Printed name	Barry E. Bretschneider		
Date	December 28, 2005	Reg. No.	28,055



Docket No. 246472006600

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In the application of:

Helmut D. LINK et al.

Serial No.: 10/814,783

Filing Date: April 1, 2004

For: CERVICAL INTERVERTEBRAL
PROSTHESIS

Examiner: Annette R. Reimers

Group Art Unit: 3733

MS Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT UNDER 37 CFR 1.111

Sir:

In response to the Action dated October 13, 2005, please amend this application as follows.

The listing of claims begins on page 2.

The Remarks begin on page 4.